

RECEIVED  
CENTRAL FAX CENTER

11/21/2005 17:19 FAX 650 813 5993

MOFO PA #EIGHT

001

NOV 21 2005

MORRISON | FOERSTER

755 PAGE MILL ROAD  
PALO ALTO  
CALIFORNIA 94304-1018  
  
TELEPHONE: 650.813.5600  
FACSIMILE: 650.494.0792  
  
WWW.MOFO.COM

MORRISON & FOERSTER LLP  
NEW YORK, SAN FRANCISCO,  
LOS ANGELES, PALO ALTO,  
SAN DIEGO, WASHINGTON, D.C.,  
  
DENVER, NORTHERN VIRGINIA,  
ORANGE COUNTY, SACRAMENTO,  
WALNUT CREEK, CENTURY CITY  
  
TOKYO, LONDON, BEIJING,  
SHANGHAI, HONG KONG,  
SINGAPORE, BRUSSELS

To:

NAME:	FACSIMILE:	TELEPHONE:
MS Amendment United States Patent and Trademark Office	(571) <del>572</del> -8300 273	(571) 272-1389

FROM: Charles D. Holland

DATE: November 21, 2005

Number of pages with cover page:	13	
-------------------------------------	----	--

Preparer of this slip has confirmed that facsimile number given is correct: 9369/cgm1

Comments:

Comments: RESPONSE TO RESTRICTION REQUIREMENT

DOCKET NO.: 275412001800  
GROUP ART UNIT: 1756  
EXAMINER: S. Rosasco  
SERIAL NO.: 10/716,811  
FILING DATE: November 18, 2003  
INVENTOR(S): Munasato KUMAGAI  
TITLE: HOLOGRAM ELEMENT

Papers attached:

1. Transmittal (1 page)
2. Fee Transmittal w/duplicate copy for fee processing (2 pages)
3. Amendment/Response (9 pages)

\*\*\*\*\*  
To ensure compliance with requirements imposed by the United States Internal Revenue Service, Morrison & Foerster LLP informs you that, if any advice concerning one or more U.S. Federal tax issues is contained in this facsimile (including any attachments), such advice is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.  
\*\*\*\*\*

CAUTION - CONFIDENTIAL

This facsimile contains confidential information that may also be privileged. Unless you are the addressee (or authorized to receive for the addressee); you may not copy, use, or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

pa-1027146

**RECEIVED**  
**CENTRAL FAX CENTER**

NOV 21 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0551-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

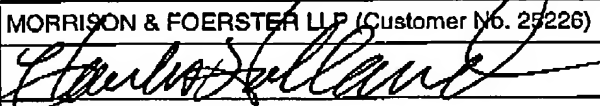
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/716,811
		Filing Date	November 18, 2003
		First Named Inventor	Munesato KUMAGAI
		Art Unit	1756
		Examiner Name	S. Rosasco
Total Number of Pages in This Submission	12	Attorney Docket Number	275412001800

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate for fee processing (2 pages) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (9 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax cover sheet
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Charles D. Holland		
Date	November 21, 2005	Reg. No.	35,196

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: November 21, 2005

Signature:  (Carolyn G. McKubre)

pa-1027099

NOV 21 2005

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2008. OMB 0851-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

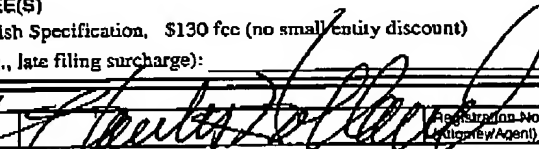
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		10/716,811	
		Filing Date	
		November 18, 2003	
		First Named Inventor	
		Munesato KUMAGAI	
		Examiner Name	
		S. Rosasco	
		Art Unit	
		1736	
TOTAL AMOUNT OF PAYMENT		(\$ 600.00)	
		Attorney Docket No.	
		275412001800	

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.18 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
18		20	0	50.00	Fee (\$)		Fee Paid (\$)
					360.00		0.00
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
7		4	3	200.00	600.00		
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
	- 100 =	/50		(round up to a whole number) x	250.00	0.00	
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):							
<b>SUBMITTED BY</b>							
Signature				Registration No.	35,196	Telephone	(650) 813-5832
Name (Print/Type)	Charles D. Holland			Date	November 21, 2005		

pa-1027117

NOV 21 2005

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006, OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/716,811
		Filing Date	November 18, 2003
		First Named Inventor	Munesato KUMAGAI
		Examiner Name	S. Rosasco
		Art Unit	1756
TOTAL AMOUNT OF PAYMENT		Attorney Docket No.	275412001800
			(S) 600.00

**METHOD OF PAYMENT** (check all that apply)

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account    Deposit Account Number: 03-1952    Deposit Account Name: Morison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17    ☒ Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
18	- 20 = 0	x 50.00 =	0.00	Fee (\$)	Fee Paid (\$)
				360.00	0.00

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7	- 4 = 3	x 200.00 =	600.00

**3. APPLICATION SIZE FEE**

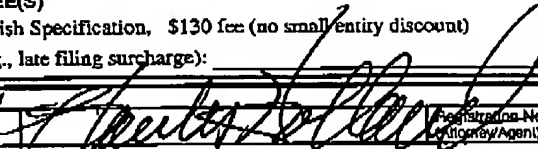
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 (round up to a whole number) x	250.00 =	0.00

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

<b>SUBMITTED BY</b>		Registration No.	35,196	Telephone	(650) 813-5832
Signature		Attorney/Agent		Date	November 21, 2005
Name (Print/Type)	Charles D. Holland				

DUPLICATE COPY  
FOR FEE PROCESSING

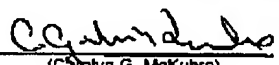
pa-1027117

**RECEIVED  
CENTRAL FAX CENTER**

005

NOV 21 2005

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: November 21, 2005 Signature: 

(Carolyn G. McKubre)

Docket No.: 275412001800

Client Ref. No.: 62007/03R00770/US  
(PATENT)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Munesato KUMAGAI

Application No.: 10/716,811

Confirmation No.: 8041

Filed: November 18, 2003

Art Unit: 1756

For: HOLOGRAM ELEMENT

Examiner: S. Rosasco

**RESPONSE TO RESTRICTION REQUIREMENT**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the restriction requirement set forth in the Office Action mailed October 19, 2005 (Paper No. 20051017), Applicant hereby elects the claims of Group II (claims 4-9) for continued examination without traverse. A response to this Office Action was due on November 19, 2005 which fell on a Saturday. This response is filed on the next business day, and accordingly this response is timely filed.

The Examiner required restriction among:

Group I, claims 1-3, drawn to a photomask, classified in class 430, subclass 5;

Group II, claims 4-9, drawn to a method of producing a hologram element, classified in class 430, subclass 1; and

pa-1027098

11/23/2005 WARELRI 00000097 031952 10716811  
01 FC:1201 600.00 DA

Application No.: 10/716,811

2

Docket No.: 275412001800

Group III, claims 10-13, drawn to a hologram element, classified in class 359, subclass 15.

Applicant also reserves the right to amend the application to include a generic claim or other linking claim or claims as prosecution proceeds. The election of the claims of Group II is not to be construed as dedication of the unelected subject matter to the public, and Applicant reserves the right to file continuing and divisional applications for this subject matter.

A current **amendment** to the claims is reflected in the listing of claims which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.

pa-1027098